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Image# 202211149546788360

FEC FORM 2

### STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Rosendale, Matt, , Mr.,						
	(b) Address (number and street) PO Box 4907	□ Che	eck if addres	s changed		2. Candidate's FEC Identif H4MT00050	fication Number
	(c) City, State, and ZIP Code					3. Is This New	
	Helena		MT	5960	4-4907	Statement (N)	OR (A)
4.	Party Affiliation	5. Office Sought	t		6. State & Dis	ct of Candidate	
	REPUBLICAN PARTY	House			MT	02	
	DE	SIGNATION	OF PRI	NCIPAL	CAMPAIG	COMMITTEE	
7.	I hereby designate the following nar	med political com	mittee as m	y Principal (	Campaign Com	ittee for the 2024 (year of election	election(s). on)
	NOTE: This designation should be f	iled with the app	ropriate offic	e listed in th	ne instructions.		
	(a) Name of Committee (in full)						
	Matt Rosendale for	Montana					
_	(b) Address (number and street)						
	PO Box 4907						
	(c) City, State, and ZIP Code						
	Helena				MT	59604	
	D.E.			.ED 4113			
	17	CIVERIA I IVAN					
						COMMITTEES	
	DL.				THORIZED g Representativ		
	I hereby authorize the following nam candidacy.	(In	cluding Join	t Fundraisin	g Representativ	s)	nd funds on behalf of my
	I hereby authorize the following name	(Induction (Induction)	cluding Join	t Fundraisin	g Representatival campaign co	s)	nd funds on behalf of my
	I hereby authorize the following name candidacy.  NOTE: This designation should be f	(Induction (Induction)	cluding Join	t Fundraisin	g Representatival campaign co	s)	nd funds on behalf of my
	I hereby authorize the following nam candidacy.	(Induction (Induction)	cluding Join	t Fundraisin	g Representatival campaign co	s)	nd funds on behalf of my
	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (a) Name of Committee (in full)	(Induction (Induction)	cluding Join	t Fundraisin	g Representatival campaign co	s)	nd funds on behalf of my
	I hereby authorize the following name candidacy.  NOTE: This designation should be f	(Induction (Induction)	cluding Join	t Fundraisin	g Representatival campaign co	s)	nd funds on behalf of my
	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (a) Name of Committee (in full)	(Induction (Induction)	cluding Join	t Fundraisin	g Representatival campaign co	s)	nd funds on behalf of my
	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (a) Name of Committee (in full)	(Induction (Induction)	cluding Join	t Fundraisin	g Representatival campaign co	s)	nd funds on behalf of my
	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (a) Name of Committee (in full)  (b) Address (number and street)	(Induction (Induction)	cluding Join	t Fundraisin	g Representatival campaign co	s)	nd funds on behalf of my
	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (a) Name of Committee (in full)  (b) Address (number and street)	(Induction (Induction)	cluding Join	t Fundraisin	g Representatival campaign co	s)	nd funds on behalf of my
	I hereby authorize the following name candidacy.  NOTE: This designation should be formula (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code	(In-	cluding Join	t Fundraisin	g Representatival campaign con	s)	
	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code	(In-	cluding Join	t Fundraisin	g Representatival campaign con	s) mittee, to receive and expe	
Sig	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate	(In-	cluding Join	t Fundraising my principal my p	g Representatival campaign con	mittee, to receive and expe	
Sig	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code	(In-	cluding Join	t Fundraising my principal my p	g Representatival campaign con	s) mittee, to receive and expe	
Sig	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate	(In-	cluding Join	t Fundraising my principal my p	g Representatival campaign con	mittee, to receive and expe	
Sig	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate	(Inned committee, while died with the prince	cluding Join	t Fundraising my principa ign committe  the best of I	g Representatival campaign contents of the cam	mittee, to receive and expe	nd complete.
Sig	I hereby authorize the following name candidacy.  NOTE: This designation should be formulated (in full)  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have example of Candidate obsendale, Matt, Mr.,	(Inned committee, while died with the prince	cluding Join	t Fundraising my principa ign committe  the best of I	g Representatival campaign contents of the cam	mittee, to receive and expe	nd complete.

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

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## **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	ROSENDALE VICTORY FUND					
	(b) Address (number and street) 1390 CHAIN BRIDGE ROAD #515					
	(c) City, State, and ZIP Code					
	MCLEAN	VA	22101			
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal camp					
	(a) Name of Committee (in full) TAKE BACK THE HOUSE 2022					
	(b) Address (number and street) PO BOX 30844					
	(c) City, State, and ZIP Code					
	BETHESDA	MD	20824			
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal campus (a) Name of Committee (in full)  FREEDOMWORKS VICTORY 2022					
	(b) Address (number and street) PO BOX 26141					
	(c) City, State, and ZIP Code					
	ALEXANDRIA	VA	22313			
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. <b>NOTE</b> : This designation should be filed with the principal camp					
	(a) Name of Committee (in full)					
	ROSENDALE MAJORITY FUND					
	(b) Address (number and street) PO BOX 4907					
	(c) City, State, and ZIP Code					
	HELENA	MT	59604			

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

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## **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.						
	(a) Name of Committee (in full)						
	ROSENDALE HARRIS 2022						
	(b) Address (number and street) PO BOX 4907						
	(c) City, State, and ZIP Code						
	HELENA	MT	59604				
8.	I hereby authorize the following named committee, which is NO candidacy. <b>NOTE</b> : This designation should be filed with the prin		mmittee, to receive and expend funds on behalf of my				
	(a) Name of Committee (in full)		_				
	ROSENDALE BIGGS 2022						
	(b) Address (number and street) PO BOX 4907						
	(c) City, State, and ZIP Code						
	HELENA	MT	59604				
8.	I hereby authorize the following named committee, which is NO candidacy. NOTE: This designation should be filed with the prin (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code		emmittee, to receive and expend funds on behalf of my				
8.	I hereby authorize the following named committee, which is NOT candidacy. <b>NOTE</b> : This designation should be filed with the printal (a) Name of Committee (in full)		mmittee, to receive and expend funds on behalf of my				
	(b) Address (number and street)						
	(c) City, State, and ZIP Code						